

Secretary of State

Application to Register a Foreign Limited Liability Company (LLC)

-FILED-

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Secretary of State	LLC-5	Fo	or Office Use	Only	\neg
Application to Register a Foreign Liability Company (LLC)	gn Limited	File No.: 202464617884 Date Filed: 11/18/2024			
Must be submitted with a current Certificate of Good Standingovernment agency where the LLC was formed.	ng issued by the				
Filing Fee - \$70.00					
Certified Copy Fee (Optional) - \$5.00					
Note: Registered LLCs in California may have to pay minimum California Franchise Tax Board each year. For more information https://www.ftb.ca.gov/ .		This Space I	For Office l	Jse Only	<u> </u>
1a. LLC Name (Enter the exact name of the LLC as listed on your at	tached Certificate of G	ood Standing.)			
HAYWARD, CA (Lot 14 Building A CCU) LLC					
1b. California Alternate Name, If Required (Only enter an alternate name if the LLC name in 1a not available in California.)					
					-
2. LLC Jurisdiction (Ensure that the jurisdiction matches the attac	ched Certificate of Gor	od Standing.)			
a. Jurisdiction (State, foreign country or place where this LLC is formed.) ILLINOIS					
b. Authority Statement (Do not alter Authority Statement) This LLC currently has powers and privileges to conduct b	usiness in the star	te, foreign country or p	lace enter	ed in Ite	m 2a.
3. Business Addresses (Enter the complete business addresse	s. Items 3a and 3b ca	nnot be a P.O. Box or "in ca	ire of an ind	ividual or	entity.)
a. Street Address of Principal Office - Do not enter a P.O. Box	1 7	City (no abbreviations)		Zip Code	
1400 16TH STREET, SUITE 300		OAK BROOK		60523 e Zip Code	
 Street Address of Principal Office in California, if any - Do not enter a P.O. 	Box City (no abbrev	City (no abbreviations)		Zip Code	
c. If the Mailing Address is the same as item 3a or 3b, check the applicable be	ox: 🔽 3a 🔲 3b			<u>,, , , , , , , , , , , , , , , , , , ,</u>	
d. Mailing Address - if different than item 3a or 3b	City (no abbrev	City (no abbreviations) State Zip C		Zip Cod	e
 Service of Process (Must provide either Individual OR Corpor INDIVIDUAL – Complete Items 4a and 4b only. Must include agent' 	· · · · · · · · · · · · · · · · · · ·	rnia street address.			
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbrev	iations)	State CA	Zip Coo	le
CORPORATION - Complete Item 4c only. Only include the name of	f the registered agent	Corporation.	I	•	•
c. California Registered Corporate Agent's Name (if agent is a corporation) – I	Do not complete Item 4	a or 4b	· · · <u> </u>		_
Corporation Service Company Which Will Do Business In C	alifornia As CSC -	Lawyers Incorporating	Service		
5. Read and Sign Below (Title not required.)					

By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized to sign

on behalf of the foreign LLC.

a. abbelon

LARISSA A. ADDISON, MANAGER

Type and Print Name

Signature

File Number

1404181-8



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

HAYWARD, CA (LOT 14 BUILDING A CCU) LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 15, 2023, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 18TH day of NOVEMBER A.D. 2024

Authentication #: 2432301696 verifiable until 11/18/2025

Authenticate at: https://www.ilsos.gov